	Enec	tive Octo	ber 1, 20	003			1	10	73	0.0:	7Y.
CLAIMS AS FILED - PART I (Gotumn 1) (Cotumn 2)						SM		NTITY	OR	OTHER	
TOTAL CLAIMS		49					MIE	FEE]	RATE	FE
FOR		MUMBER FILED		NUMBER EXTRA		BA	SIC FEI	385.00	OR	BASIC FEE	770.
TOTAL CHARGEABLE CLAIMS		(fil minus 20=		· 79		,	S9 =		OR	X\$18=	52
INDEPENDENT CLAIMS		// minus 3 =		* *		7	(43°		OR	X86=	688
MULTIPLE DEPE	RESENT			Ō	1.	145°		ОЯ	+290=		
tt the difference	e in column 1 is	less than z	ero, enter	*0" in c	olumn 2		OTAL		OR	TOTAL	148
C	LAIMS AS A	MENDE	D - PAR	T II					,	OTHER	THAN
12-31-03			(Colun		(Column 3)	S!	MALL	ENTITY	OR	SMALL	
ATM	CLAIMS REMAINING AFTER AMENDMENT		PREVIO	BER	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	TION
Total Independent	. 49	Minus		9	• &	×	\$ 9=		OR	X\$18=	
Independent	• 11	Mirrus	<u> </u>	11 .	• 😎	×	43=		OR	X86=	
FIRST PRES	NTATION OF M	ULTIPLE DE	PENDENT	CLAIM			45=		OR	+290=	
1.11.					•		TOTAL			TOTAL	
11//4/0	(Column 1)	•	(Colum	m 2)	(Column 3)	ADO	IT. FEE!	; .	, ••••	ADDIT, FEE	
Total Independent	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	ER USLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADD TION FE
Total	. 49	Minus	- 4	9		X	\$ 9=		OR	X\$18=	
Independent	• 11	Minus	· /	_	-	×	43=		OR	· X86=	
FIRST PRESE	NTATION OF MI	ATIPLE DE	PENDENT	COUM	بك	+1	45=		OR	+290=	
Stal.i		•					T. FEE		OR	TOTAL ADDIT, FEE	
C// 1///					(Column 3)				2		
1/00	(Column 1)		(Colum	m 2)	00.0						
7/00	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGH HIGH NUMB PREVIO PAIO F	ER USLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	TION
	CLAUMS REMAINING AFTER	Minus	HIGHI NUMB PREVIO	ER USLY YOR	PRESENT	-	ATE		OR	RATE X\$189	TIGH
	CLAIMS REMAINING AFTER AMENDMENT	Minus Minus	HIGHE NUMB PREVIO PAID F	ER USLY YOR	PRESENT	XS	9=	TIONAL FEE	OR	X\$180	TIGH
Independent	CLAIMS REMAINING AFTER AMENDMENT	Minus	HIGHI NUMB PREVIO PAID F	ER USLY YOR	PRESENT	XS		TIONAL FEE	OR OR	RATE XS182 XSS-	TIGH
tndependent	CLAIMS REMAINING AFTER AMENDMENT	Minus	HIGHI NUMB PREVIO PAID F	ER USLY YOR	PRESENT	XS	9=	TIONAL FEE		X\$180	TIGH

FORM PTO-478 (Rev. 1000)

Application or Docket Number